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Fordingbridge Rural District Council

Sanitary Authority.

*San B.*  
ANNUAL REPORT

FOR THE

YEAR ENDING DECEMBER 31st, 1903,

BY THE

*Medical Officer of Health*


TO THE

FORDINGBRIDGE UNION.

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FORDINGBRIDGE :

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**D**URING the Year 1903 there have been registered:—

*170 Births* (90 males, 80 females). This shows an increase of 24 on the number registered in 1902, and is one more than the number for 1901. It is about two above the average for the past 10 years, and is 27·73 per 1,000 as against 27·01 per 1,000, which is the average rate per 1,000 for the past 10 years. Hence we see that the Birth-rate is once more in a thoroughly satisfactory state, added to which we shall see that the mortality below 1 year is the lowest for a great many years, viz., 10, as against an average of 15·7 for the past 10 years. Ten of the 170 Births were illegitimate.

*72 Deaths* from all causes. This is equal to 11·7 per 1,000 of the population, which is returned at 6,130 souls.

This Death-rate is three below the average for the past 10 years (which is 14 per 1,000), and the total number of deaths is the lowest by far of all those recorded during the past 10 or 12 years, the nearest being 79 in 1899. The high Birth-rate and the exceptionally low Death-rate mark the year 1903 as one of the best on record during the past 18 years, as far as vital statistics go. 46 of the deaths occurred in the first half of the year, and 26 in the second half. The three healthiest months were February with 3 deaths, October 3 deaths, and November 1 death; whilst the months showing the highest mortality were June with 12 deaths, April with 10 deaths, and May with 9 deaths. The first three months of the year show 15 deaths, and the last three months 10 deaths, so that the summer months seems to have been the least healthy.

#### COMMENTS ON THE DEATH-RATE.

Of the **72 Deaths**, 37 were males, 35 were females. **32** were *70 years or over* that age (18 males, 14 females), **10** being *80 years or over* that age (3 males and 7 females), the oldest recorded age being 86 years. The 32 over 70 years of age averaged 77·65 years each; the 18 males averaged 76·1 years each, and the 14 females 79·6 years each. These average ages are lower than in 1902, except the females, and they average 2 years higher.

**8** were *between 60 and 70 years* of age (3 males and 5 females).

The mortality *below 1 year of age* amounted to **10** (8 males and 2 females). This number, as I remarked before, is the lowest recorded for many years, and gives a rate of 58·8 per 1,000. Three of the deaths are registered as due to premature birth. **42** of the total number of deaths were at the two extremes of life, and **50** of the 72 deaths recorded occurred below 1 year and over 60 years of age, so that only **22** are left to be distributed over the intervening 59 years. 3 deaths occurred between 1 and 5 years, 1 between 5 and 15 years, and 4 between 15 and 25 years, as against 13 between 1 and 5 years, 3 between 5 and 15 years, and 4 between 15 and 25 years in 1902.

#### ZYMOTIC DISEASES INCLUDED IN TABLE III.

Under this heading we have recorded 7 cases of *Diphtheria*, 9 of *Erysipelas*, 8 of *Scarlet Fever*, and 4 of *Typhoid Fever*.

*Diphtheria*—Of the 7 recorded cases, 1 was below and 6 were above 5 years of age. With the exception of two cases which occurred in the same house, they were all isolated cases, which ran a very uneventful course. Two of the recorded cases occurred in the same patient at separate times during the year.

The two cases occurring in the same house were not at the same time. The first case was in a child, and was so extremely slight, that it was not until the length of time that the convalescence continued, and the resulting weakness was so much greater than might have been expected from so slight a primary illness, that I was finally compelled to report the case as one of *Diphtheria*. I then inspected the premises, and found several defects in drainage, and the drains were thoroughly overhauled. Just then a servant went away for a week's change, and coming back fresh to the house, with all the drains opened, she got a dose of *Diphtheritic* poison and developed a well marked case of the disease. Since then the drains have been put right, and the house has remained quite free of disease.

None of the cases proved fatal.

*Erysipelas*—Of the 9 recorded cases, 1 was below and 8 were above 5 years of age. All the cases were of the mild variety, and terminated favourably. They all occurred separately as to time and locality.

*Scarlet Fever*—Of the 8 recorded cases, 3 were below and 5 were above 5 years of age. Five cases occurred in one house at



Woodgreen, and seemed to be entirely due to some unreported cases occurring amongst some gipsies living close by. This is a case in point showing the great danger to the community that might result from this class, as it is very difficult to make them conformable to the rules and regulations that exist in the ordinary way. The question of vaccination amongst them has been entirely shelved, as there is no getting hold of them—being a nomadic population they are here to-day and gone to-morrow. There was some difficulty with the agent for the owner of the cottages inhabited by these infected gipsies, as to the necessary disinfection, and I wrote very strongly to the Rural District Council on the subject. Whilst the case was still under consideration, I was incapacitated by severe accident, and the case was finally settled by the burning down of the cottages, the work of some incendiaries in all probability.

All the cases were brought to a satisfactory issue, and all necessary directions as to isolation, disinfection, etc., were given and seen to by the Inspector of Nuisances.

*Typhoid Fever*—Four cases were reported, all above 5 years of age, and all at separate times and in separate localities. I believe all but one case recovered, and on post-mortem examination that was proved to be a case of Cancer of the Colon.

#### ZYMOTIC DISEASES NOT INCLUDED IN TABLE III.

*Measles*—The only case reported was that of a gipsy at Martin, who really died on the 29th of December, 1902. In this case death resulted from Broncho-Pneumonia following Measles.

*Influenza*—35 cases, 34 above and 1 below 5 years of age are reported. The disease seems to have been nearly or quite absent from the District during the latter half of the year. Six deaths are attributed to this disease and its complications, 3 of them being Pneumonia after a few days of Influenza, 2 of them Cerebral Embolism after Influenza, and 1 Influenza complicating Nephritis. There is a mild form of the disease in the district at the time of writing.

*Pertussis or Whooping Cough*—12 cases are reported, 7 below, 5 above 5 years of age, and all at Damerham. No case proved fatal.

*Other or Doubtful Fevers*—Under this heading are included cases of Febricula, Tonsillitis, Varicella, German Measles, Mumps, etc., and 2 cases below, and 19 above 5 years of age are reported. No fatalities.

#### OTHER DISEASES.

*Diarrhœa*—16 cases of this disease are reported amongst Pauper Patients, 4 below and 12 above 5 years of age. No cases have proved fatal, either directly or indirectly. In spite of the abnormal amount of rain and damp weather, the usual "Autumn epidemic" seems to have been absent, a fact, I think, explained by the weather remaining at one level the whole of the latter half of the year. The epidemics of *Diarrhœa*, which used to be so prevalent in the District, seem to be things of the past during the last few years.

*Bronchial and Respiratory Disorders*—Under this head are included *Phthisis*, *Pleurisy*, *Pneumonia*, *Asthma*, *Bronchitis* and *Catarrh*, and amongst Pauper Patients we have 16 below and 102 above 5 years of age recorded. This shows a slight increase on the number recorded amongst Pauper Patients last year. 4 deaths from *Phthisis* have occurred, all above 5 years of age, and 4 deaths from *Meningitis*, 1 above, 3 below 5 years of age, and all probably of tubercular origin. This total is 3 above that for 1902. All the adult deaths were due to *Phthisis Pulmonalis*; one was a case of 8 years standing, severe Hæmoptysis having occurred so long ago as that, the disease having been kept in abeyance for 7 years before it finally took on fatal activity again; another one died 4 years after Hæmoptysis; another case was very acute *Phthisis* after childbirth. 3 deaths are recorded as due to *Bronchitis* and complications, all above 5 years of age, and 9 deaths are recorded as due to *Pneumonia*, all above 5 years of age; also 2 deaths are reported as due to *Laryngitis* in children under 1 year of age. Adding the 3 deaths attributed to Influenza, other than the 3 Influenzal Pneumonias, included under the latter head, we find the total number of deaths under the heading of *Bronchitis*, etc., is 17 for 1903 as against 20 for 1902. Adding the 8 deaths due to Tubercular trouble, we have 25 deaths recorded under Respiratory Disorders, as compared with 24 in 1902.

*Heart Disease*—17 deaths are reported as due to some form or other of disease of this organ, all above 5 years of age. This total is 4 more than in 1902. Two of the deaths were due to

*Angina Pectoris*, 2 to *Ulcerative Endocarditis*, 6 to *Mitral Regurgitation*, 2 to *Fatty Degeneration*, 1 to *Clot of Blood* in the heart, 1 to *Air in the Blood and Heart*, and 3 to “*Heart Disease*.”

*New Growths*—11 deaths are reported under this head, as compared with 6 in 1902, 7 in 1901, 6 in 1900, 1 in 1899, 4 in 1898, and 8 in 1897. Four were due to *Cancer of the Bowel*, 2 to *Cancer of the Stomach*, 1 to *Cancer of Breast*, 1 to *Cancer of Uterus*, 1 to *Cancer of Liver*, 1 to *Cancer of Penis*, complicating Heart Disease, 1 to *Cancer or Sarcoma of the Upper Jaw*. This is a great increase on the number of fatal cases, and it would really look as though the disease was on the increase in this District.

*Deaths by Accident or Injury*—3 are reported. 1 was due to *Drowning*, 1 to *Burns*, 1 to *Volvulus or Twisting of the Bowel*, death resulting after operation. There was also another death which seemed accidental, and that was the case of *Air in the Veins*, but the site of entrance of the air was not found.

4 Deaths resulted from *Cerebral Hæmorrhage*, 2 from *Infantile Convulsions*, 3 from *Premature Birth*, 1 from *Nephritis* after Lithotrity, 1 from *Cirrhotic Kidneys* with Uræmia, 1 from *Gastric Ulcer and Hæmatemesis*, and 1 from *Exhaustion* after 20 years of Rheumatoid Arthritis.

6 Deaths occurred in the Fordingbridge Union Infirmary, and 5 in the Fordingbridge Nursing Home.

The total number of cases of sickness amongst Paupers is 471 in the Outdoor Department and 59 in the Workhouse. The Outdoor is 4 less than in 1902, and the Workhouse 1 more than in 1902.

#### GENERAL SANITARY CONDITION OF THE DISTRICT.

During the year 1903, the Sanitary Condition of the District has been very good, as I have pointed out in foregoing paragraphs of my report. No cases have been brought before the Magisterial Bench, although at one time it seemed probable that such extreme measures would have to be adopted in a case of open defiance of the Public Health Act, by an agent, in a case of disinfection of cottages infected by Scarlet Fever, but I am glad to say that the matter was settled without this alternative. I am not in a position to report so fully under this heading as usual, as, owing to a very



dangerous accident in July, I have been absent from home ever since until January of this year, but the routine work of Medical Officer of Health was carried out by my brother, Dr. Alfred Rake, who was appointed by the Local Government Board and Fordingbridge District Council, in my place. I have to express my thanks for the assistance which was thus afforded me, in securing the complete recovery of health which I now enjoy. I have pleasure in stating that the Inspector of Nuisances has performed his duties well, and has afforded both my brother and me every assistance in his power.

There has been very little infectious disease in the district, and nothing approaching an epidemic. All cases reported have been followed up and proper sanitary measures taken to arrest the spread of the disease. There was a most virulent outbreak of Diphtheria just over the border at Sandleheath, but I am glad to say that it did not spread into the Fordingbridge District. I have drawn attention elsewhere to the spread of Scarlet Fever at Woodgreen by means of gipsy children, and remarked on the little hold the Sanitary Authorities have on this shifting population.

With regard to the working of the Public Health Act in connection with the Factory and Workshop Act in this District, I beg to report that owing to the very few Workshops and Factories in the neighbourhood, the Act does not really concern us much. Such Workshops and Bake-houses as do exist are periodically inspected by the Inspector of Nuisances, and any necessary directions given to ensure their being kept in a healthy state.

Schools, Lodging-houses, and Slaughter-houses are also periodically inspected and reported on, and we have had some trouble with one lodging-house, which has for years been an annual source of annoyance, but I believe the nuisance has now ceased to exist.

Under the provisions of the Public Health (Water) Act, 1878, I have examined more than usual samples of water, viz., 25; have reported on their quality, and when possible have given the necessary certificates of fitness for use.

There is a steady improvement in the cottage accommodation in the villages. A great number of fires have occurred, and in consequence, modern cottages replace the old and ill-ventilated mud and thatch erections which have disappeared.



I must again call attention to the unfenced gravel pits in the neighbourhood. No fencing has been done, and the pits are, if anything, more dangerous than before.

The Inspector of Nuisances reports that the Refuse Collection is proceeding satisfactorily, and the people taking advantage of the same are increasing in numbers every year.

Owing to the necessity for renovation and improvement of School Premises likely to occur before the County Council will take over the Buildings under the new Education Act, I hope to have an opportunity of getting the pail system substituted for the present very general tank system of privies, the latter always having appeared to my mind to be a very possible source of danger to the children, and in one instance a very fatal and widespread outbreak of Diphtheria at Damerham was traced to this cause.

I append the

INSPECTOR OF NUISANCES' REPORT FOR  
THE YEAR 1903.

Schools inspected	...	...	10	Samples of Water taken					
Slaughter-houses inspected			4	for examination	...	...	25		
Bake-houses inspected	...	...	21	New W.C. accommodation					
Cottages inspected	...	...	153	provided...	...	...	3		
Filthy houses cleansed	...	...	6	Privies altered, repaired, or					
Houses placed in habitable				cleansed	...	...	9		
repair	...	...	5	Nuisances reported or de-					
Houses disinfected	...	...	11	tected	...	...	55		
Overcrowding abated..	...	...	4	Notices served	...	...	3		
Wells sunk, repaired, or									
cleansed	...	...	5						

ARTHUR E. ALEXANDER, A.S.I.,

*Inspector of Nuisances.*

HERBERT V. RAKE,

*Medical Officer of Health for the Rural District Council  
of the Fordingbridge Union.*

